## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

10/580996 APPLICANTIO

## CLAIMS

	AS FILED		AFTER		AFTER MANDIOMENT				AS FILED		AFTER IM AMENDMENT		AFTER 244 AMERICANT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL			1-1				<u> </u>	CLADGE			<u>.                                    </u>			

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